BEST AVAILABLE COPY													
Application or Docket Number													
PATENT APPLICATION FEE DETERMINATION RECORD													1
Effective October 1, 2001 3867 OKIO9													
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN													THAN
(Column 1) (Column 2)									TYPE		OR	SMALL	
TOTAL CLAIMS				14					RATE	FEE		RATE	FEE
FOR				NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OB	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS									Y# 0			X\$18=	
				/		<i>P</i>			X\$ 9=		OR	V910=	
INDEPENDENT CLAIMS				minus 3 =					X42=		OR	X84= .	84
MULTIPLE DEPENDENT CLAIM P				RESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL		OR	TOTAL	824
CLAIMS AS AMENDED - PART II OTHER TH												THAN	
7-	5-05		umn 1)		(Colu		(Column 3)		SMALLE	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	• 1	4	Minus	-2	Ö	= (X\$ 9≃		OR	X\$18=	
É	Independent	ent *		Minus	Minus 1		= /		X42=		OR	X84=	
₹	FIRST PRESE	ON OF M	ULTIPLE DEPENDENT CLAI							٦			
									+140=		OR	+280=	
									TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		REM	AIMS IAINING FTER NDMENT		NUM PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total			Minus	44		=		X\$ 9=		OR	X\$18=	
	Independent	•		Minus	444		=		X42=		OR	X84=	
	FIRST PRESE	NTATIO	ON OF M	ULTIPLE DI	EPENDEN	T CLAIM]				-	
									+140=		OR	<u> </u>	
•									TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Co	lumn 1)		(Colu	ımn 2)	(Column 3))					
AMENDMENT C		REN A	LAIMS MAINING FTER NOMENT		HIG NUI PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total			Minus	***			1	X\$ 9=		OR	X\$18'=	
	Independent	*		Minus	***		=	1			1	V04-	†
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	X42=		OR		
	•							_	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE											OR	TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE ADDIT FEE													
		• • •	,		•	•	-		·				

FORM PTO-875 (Rev. 8/01)

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